

FORM B1						United States Bankruptcy Court Northern District of Illinois							Voluntary Petition		
Name of Debtor (if individual, enter Last, First, Middle): Pompea, Jeffrey D.								Name of Joint Debtor (Spouse) (Last, First, Middle): Pompea, Patricia R.							
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):								All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):							
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): xxx-xx-7507								Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): xxx-xx-4057							
Street Address of Debtor (No. & Street, City, State & Zip Code): 2911 Glenwood Dyer Road Chicago Heights, IL 60411								Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 2911 Glenwood Dyer Road Chicago Heights, IL 60411							
County of Residence or of the Principal Place of Business: Cook								County of Residence or of the Principal Place of Business: Cook							
Mailing Address of Debtor (if different from street address):								Mailing Address of Joint Debtor (if different from street address):							
Location of Principal Assets of Business Debtor (if different from street address above):															
Information Regarding the Debtor (Check the Applicable Boxes)															
Venue (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.															
Type of Debtor (Check all boxes that apply) <input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____ <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank						Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13									
Nature of Debts (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business						Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only.) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.									
Chapter 11 Small Business (Check all boxes that apply) <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)															
Statistical/Administrative Information (Estimates only) <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.											THIS SPACE IS FOR COURT USE ONLY				
Estimated Number of Creditors 1-15 16-49 50-99 100-199 200-999 1000-over <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>															
Estimated Assets \$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million \$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001 to \$100 million More than \$100 million <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>															
Estimated Debts \$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million \$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001 to \$100 million More than \$100 million <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>															

Voluntary Petition (This page must be completed and filed in every case)		Document Page 2 of 4		FORM B1, Page 2	
Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)					
Location Where Filed: - None -		Case Number:		Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)					
Name of Debtor: - None -		Case Number:		Date Filed:	
District:		Relationship:		Judge:	
Signatures					
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.			Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		
X _____ Signature of Debtor Jeffrey D. Pompea			Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.		
X _____ Signature of Joint Debtor Patricia R. Pompea			X _____ March 31, 2005 Signature of Attorney for Debtor(s) Date		
_____ Telephone Number (If not represented by attorney)			Exhibit C Does the debtor own or have possession of any property that poses a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		
March 31, 2005 Date			Signature of Non-Attorney Petition Preparer I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.		
Signature of Attorney X _____ Signature of Attorney for Debtor(s) Monica C. O'Brien (O'MO) 6216626 Printed Name of Attorney for Debtor(s) Gregory K. Stern, P.C. Firm Name 53 West Jackson Boulevard Suite 1442 Chicago, IL 60604 Address (312) 427-1558 Fax: (312) 427-1289 Telephone Number March 31, 2005 Date			_____ Printed Name of Bankruptcy Petition Preparer _____ Social Security Number (Required by 11 U.S.C. § 110(c).) _____ Address Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document: If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.		
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.			X _____ Signature of Bankruptcy Petition Preparer _____ Date A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.		
X _____ Signature of Authorized Individual _____ Printed Name of Authorized Individual _____ Title of Authorized Individual _____ Date					

Account Management Service
P.O. Box 19617
Indianapolis, IN 46219-0617

Bank One
P.O. Box 100045
Kennesaw, GA 30156-9245

Bindal Anesthesiologists
541 Otis Bowen Drive
Munster, IN 46321

Capital One
P.O. Box 85015
Richmond, VA 23285-5015

Codilis & Associates
15W030 North Frontage Road
Suite 100
Burr Ridge, IL 60527

Community Hospital
Patient Accounts
P.O. Box 3602
Munster, IN 46321-0756

First Savings Bank Hegewisch
13220 Baltimore Avenue
Chicago, IL 60633

Ford Motor Credit
P.O. Box 6508
Mesa, AZ 85216-6508

Gomberg and Sharfman Ltd.
208 S. LaSalle Street, Suite 1200
Chicago, IL 60604

IndyMac Bank
P.O. Box 4045
Kalamazoo, MI 49003-4045

MB Financial Bank, NA
2 Mid City Plaza
Chicago, IL 60607

Mutual Hospital Services
P.O. Box 19828
Indianapolis, IN 46219-0828

PLS Financial
P.O. Box 4384
Chicago, IL 60680-4384

Providian
P.O. Box 9016
Pleasanton, CA 94566

St. James Hospital & Health Centers
1423 Chicago Road
Chicago Heights, IL 60411

Target National Bank
c/o Target Credit Services
P.O. Box 1581
Minneapolis, MN 55440-1581

Wells Fargo Financial
17645 S. Torrence Ave.
Lansing, IL 60438-4839